

Form **W-2** Wage and Tax Statement 38-2099803 **2020**

Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service

Department of the Treasury - Internal Revenue Service		OMB No. 1545-0008		1 Wages, tips, other compensation	2 Federal income tax withheld	
				1638.00	149.54	
c Employer's name, address, and ZIP code		7 Social security tips	3 Social security wages	4 Social security tax withheld		
University of Central Missouri		8 Allocated tips	5 Medicare wages and tips	6 Medicare tax withheld		
P O Box 800		9	10 Dependent care benefits	11 Nonqualified plans		
Warrensburg MO 64093		12a Code See instructions for box 12	12b Code	12c Code		
e Employee's name, address, and ZIP code		12d Code	13 Statutory empl. Retirement plan Third-party sick pay	d Control number		
Bhagyasree Andalvri				77		
679 E Royal Ln Apt 3092		a Employee's social security no.	b Employer ID Number (EIN)	14 Other		
Irving TX 75039-3587		039-02-9682	44-6000293			
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
MO	10537821	1638.00	42.00			

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Copy C - For EMPLOYEE'S RECORDS
(See Notice to Employee on the back of Copy B.)

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Copy 2 - To Be Filed With Employee's State, City or Local
Income Tax Return

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